

Exhibit B

Corporate Documents

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AFFINITY MOBILE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF NOVEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AFFINITY MOBILE, LLC" WAS FORMED ON THE TENTH DAY OF DECEMBER, A.D. 2004.

VERMONT
SECRETARY OF STATE
2006 NOV -9 PM 12: 4



3894346 8300

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5175983

Form LLC-45.5 December 2004	Illinois Limited Liability Company Act Application for Admission to Transact Business	FILE # _____
Secretary of State Jesse White Department of Business Services Limited Liability Division Room 351 Howatt Building 501 S. Second St. Springfield, IL 62756 www.cyberdriveillinois.com	SUBMIT IN DUPLICATE Must be typewritten _____ This space for use by Secretary of State.	This space for use by Secretary of State.
Payment must be made by certified check, cashier's check, Illinois attorney's C.P.A.'s check or money order payable to Secretary of State.	Filing Fee: \$ 500 Penalty: \$ Approved: _____	

- Limited Liability Company name: Affinity Mobile, LLC
 Must comply with Section 1-10 of ILLCA or item 2 below applies.
- Assumed name, other than the true company name, under which the company proposes to transact business in Illinois:

 If applicable, form LLC-1.20, Application to Adopt an Assumed Name, must be completed and attached to this application.
- Jurisdiction of organization: Delaware
- Date of organization: December 10, 2004
- Period of duration: Perpetual
- Address, including county, of the office required to be maintained in the jurisdiction of its organization or, if not required, of the principal place of business (P.O. Box alone or c/o is unacceptable):
10900 Wilshire Blvd., Suite 401

Number	Street	Suite #
<u>Los Angeles, CA 90024 Los Angeles County</u>		
City/State	ZIP Code	County
- Registered agent: CT Corporation System

First Name	Middle Name	Last Name
------------	-------------	-----------

 Registered office: 208 South LaSalle Street, Suite 814
 (P.O. Box alone or c/o is unacceptable.)

Number	Street	Suite #
<u>Chicago, Cook County Illinois 60604</u>		
City	County	ZIP Code
- If applicable, date on which the company first did business in Illinois: June 14, 2006

(continued on back page)

LLC-45.5

9. Purpose or purposes for which the company is organized and proposes to conduct business in Illinois: (Include the Business Code # from IRS Form 1065.)

To engage in any lawful act or activity for which corporations may be organized under the

General LLC Laws of Delaware and as permitted under the IL LLC Act.

Business Code Number:

10. The Limited Liability Company:
- ☐ is managed by a manager or managers
 - ☐ has management vested in the member or members
11. The Illinois Secretary of State is, hereby, appointed the agent of the Limited Liability Company for service of process under the circumstances set forth in subsection (b) of Section 1-50 of the Illinois Limited Liability Company Act.
12. This application is accompanied by a Certificate of Good Standing or Existence, as well as a copy of the Articles of Organization, as amended, duly authenticated within the last 60 days, by the officer of the state or country wherein the LLC is formed.
13. If the period of duration is a date certain and is not stated in the Articles of Organization from the domestic state, a copy of that page from the Operating Agreement stating the date also must be submitted.
14. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this application for admission to transact business is to the best of my knowledge and belief, true, correct and complete.

Dated June 7, 2006.

Month/Day

Year


Signature (Must comply with Section 5-45 of ILLCA.)

Arif Haji, President

Name and Title (type or print)

If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC. Please refer to Sections 178.20(d) of the Administrative Rules.

**Form 304
(Revised 1/06)**

Return in duplicate to:
 Secretary of State
 P.O. Box 13697
 Austin, TX 78711-3697
 512 463-5555
 FAX: 512/463-5709
Filing Fee: \$750



This space reserved for office use.

**Application for
 Registration
 of a Foreign Limited
 Liability Company**

1. The entity is a foreign limited liability company. The name of the entity is:

Affinity Mobile, LLC

2A. The name of the entity in its jurisdiction of formation does not contain the word "limited liability company" or "limited company" (or an abbreviation thereof). The name of the entity with the word or abbreviation that it elects to add for use in Texas is:

2B. The entity name is not available in Texas. The assumed name under which the entity will qualify and transact business in Texas is:

3. Its federal employer identification number is: 54-2196447

☐ Federal employer identification number information is not available at this time.

4. It is organized under the laws of: (set forth state or foreign country) Delaware

and the date of its formation in that jurisdiction is: 12/10/2004

mm/dd/yyyy

5. As of the date of filing, the undersigned certifies that the foreign limited liability company currently exists as a valid limited liability company under the laws of the jurisdiction of its formation.

6. The purpose or purposes of the limited liability company that it proposes to pursue in the transaction of business in Texas are set forth below. The entity also certifies that it is authorized to pursue such stated purpose or purposes in the state or country under which it is organized.

Any lawful business or activity under the laws of this state.

7. The date on which the foreign entity intends to transact business in Texas, or the date on which the foreign entity first transacted business in Texas is: 06/14/06

mm/dd/yyyy

8. The principal office address of the limited liability company is:

<u>10900 Wilshire Blvd., Suite 401</u>	<u>Los Angeles</u>	<u>CA</u>	<u>US</u>	<u>90024</u>
<i>Address</i>	<i>City</i>	<i>State</i>	<i>Country</i>	<i>Zip/Postal Code</i>

Complete item 9A or 9B, but not both. Complete item 9C.

☒ 9A. The registered agent is an organization (cannot be entity named above) by the name of:**CT Corporation System**

OR

☐ 9B. The registered agent is an individual resident of the state whose name is:

First Name	M.I.	Last Name	Suffix
------------	------	-----------	--------

9C. The business address of the registered agent and the registered office address is:

Street Address	City	State	Zip Code
350 N. St. Paul Street	Dallas	TX	75201

10. The entity hereby appoints the Secretary of State of Texas as its agent for service of process under the circumstances set forth in section 5.251 of the Texas Business Organizations Code.

11. The name and address of each governing person is:

NAME OF GOVERNING PERSON (Enter the name of either an individual or an organization, but not both.)				
IF INDIVIDUAL				
Frederick	W.	Field		
First Name	M.I.	Last Name	Suffix	
OR				
IF ORGANIZATION				
Organization Name				
ADDRESS OF GOVERNING PERSON				
10900 Wilshire Blvd., Suite 1400	LOS ANGELES	CA	USA	90024
Street or Mailing Address	City	State	Country	Zip Code
NAME OF GOVERNING PERSON (Enter the name of either an individual or an organization, but not both.)				
IF INDIVIDUAL				
Peter	W.	Smith		
First Name	M.I.	Last Name	Suffix	
OR				
IF ORGANIZATION				
Organization Name				
ADDRESS OF GOVERNING PERSON				
400 N. Michigan Ave., Suite 520	Chicago	IL	USA	60611
Street or Mailing Address	City	State	Country	Zip Code
NAME OF GOVERNING PERSON (Enter the name of either an individual or an organization, but not both.)				
IF INDIVIDUAL				
First Name	M.I.	Last Name	Suffix	
OR				
IF ORGANIZATION				
Organization Name				
ADDRESS OF GOVERNING PERSON				
Street or Mailing Address	City	State	Country	Zip Code

Supplemental Provisions/Information

Text Area: [The attached addendum, if any, is incorporated herein by reference.]

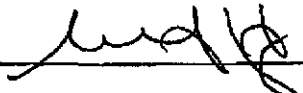
Effectiveness of Filing (Select either A, B, or C.)

- A. ☒ This document becomes effective when the document is filed by the secretary of state.
- B. ☐ This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: _____
- C. ☐ This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90th day after the date of signing is: _____
- The following event or fact will cause the document to take effect in the manner described below:
- _____
- _____

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Date: June 7, 2006



PRESIDENT

Signature and title of authorized person on behalf of the foreign entity



OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

0190018-8

04/13/2007

C T CORPORATION SYSTEM
208 SO LASALLE ST, SUITE 814
CHICAGO, IL 60604-1101

RE AFFINITY MOBILE, LLC
ASE: TRUMPET MOBILE

DEAR SIR OR MADAM:

APPLICATION TO ADOPT AN ASSUMED NAME HAS BEEN PLACED ON FILE AND THE
LIMITED LIABILITY COMPANY CREDITED WITH THE REQUIRED FEE.

SINCERELY YOURS,

A handwritten signature in cursive script that reads "Jesse White".

JESSE WHITE
SECRETARY OF STATE

DEPARTMENT OF BUSINESS SERVICES
LIMITED LIABILITY COMPANY DIVISION
TELEPHONE (217)524-8008

JW:LLC

Form **LLC-1.20**

July 2005

Secretary of State Jesse White
Department of Business Services
Limited Liability Division
Room 351 Howlett Building
501 S. Second St.
Springfield, IL 62756
www.cyberdriveillinois.com

Payment must be made by business
firm check payable to Secretary of
State. (If check is returned for any
reason this filing will be void.)

Illinois
Limited Liability Company Act
Application to Adopt, Change, Cancel
or Renew an Assumed Name

Filing Fee - see note on reverse side

SUBMIT IN DUPLICATE

Must be typewritten

This space for use by Secretary of State.

Filing Fee: \$ 90.00

Approved: JB

FILE # 01900188

This space for use by Secretary of State.

FILED

APR 13 2007

JESSE WHITE
SECRETARY OF STATE

1. Limited Liability Company Name: Affinity Mobile, LLC
2. State or Country under the laws of which the company is organized: (check one)
☐ Illinois (domestic) ☒ Foreign (specify): Delaware
3. Date organized (if an Illinois Limited Liability Company) or date authorized to transact business in Illinois (if a foreign Limited Liability Company): June 27, 2006
4. TO ADOPT: (a) The Limited Liability Company intends to adopt and transact business under the assumed name of: Trumpet Mobile
(b) The right to use the assumed name shall be effective from the date this application is filed by the Secretary of State until June 1, 2010, the first day of the company's anniversary month in the next year, which is evenly divisible by five.
5. TO CHANGE: (a) The above-named Limited Liability Company intends to cease transacting business under the assumed name of: _____
(b) and to commence transacting business under the new assumed name of: _____
6. TO CANCEL: The above-named Limited Liability Company intends to cease transacting business under the assumed name of: _____
7. TO RENEW: (a) The above-named Limited Liability Company intends to renew the assumed name of: _____
(b) The right to use the assumed name shall be effective from the date this application is filed by the Secretary of State until _____, 20____, the first day of the company's anniversary month in the next year, which is evenly divisible by five.

LLC-1.20

8. The undersigned affirms, under penalties of perjury, having authority to sign hereto, that this Application to Adopt, Change, Cancel or Renew an Assumed Name is to the best of my knowledge and belief, true, correct and complete.

Dated December March 20, 2006 2007.
Month & Day Year
Arif Haji, Manager
Signature
Name and Title (type or print)

If applicant is a company or other entity, state name of company
and indicate whether it is a member or manager of the LLC.

- NOTE:
- a. An assumed name may be adopted in five-year increments. The right to use an assumed name shall be effective from the date of filing by the Secretary of State until the first day of the anniversary month of the Limited Liability Company that falls within the next calendar year evenly divisible by 5.
 - b. The filing fee to adopt an assumed name is \$150 for each year or part thereof ending in 0 or 5; \$120 for each year or part thereof ending in 1 or 6; \$90 for each year or part thereof ending in 2 or 7; \$60 for each year or part thereof ending in 3 or 8; or \$30 for each year or part thereof ending in 4 or 9.
 - c. The fee to change an assumed name is \$100.
 - d. The fee for canceling an assumed name is \$100.
 - e. The fee to renew an assumed name is \$300. An assumed name may be renewed 60 days prior to the expiration of the right to use the assumed name, for a period of five years, by making an election to do so at the time of filing the Annual Report and by paying the renewal fees as prescribed by this Act.
 - f. A penalty of \$100 will apply to any assumed name renewed on or after the first day of the company's anniversary month. If the assumed name is not renewed within the 60 days commencing with the first day of the company's anniversary month, the right to use the assumed name shall cease.